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FEE TRANSMITTAL For FY 2009  Application Number   10/540,004   Conft. No.: 8050   Filing Date   June 21, 2005   First Named Inventor   Yasushi TAKANO   Examiner Name   S. Abu Ali   Art Unit   1793   Attorney Docket No.   0033-1008PUS1    METHOD OF PAYMENT (check all that apply)  Check   Credit Card   Money Order   None   Other (please identify):   Deposit Account Deposit Account Number: 02-2448   Deposit Account Name: Birch Stewart Kolasch & Birch LLP   For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FOR FY 2009    Applicant claims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (\$) 1,300.00   Attorney Docket No.   0033-1008PUS1   AT Unit   1793   Attorney Docket No.   0033-1008PUS1   METHOD OF PAYMENT (check all that apply)   Check   Credit Card   Money Order   None   Other (please identify);   Deposit Account Deposit Account Number: 02-2448   Deposit Account Name; Birch Stewart Kolasch & Birch LLP					ication Number	10/540,00	4	Conf. No.: 8050	
Applicant claims small entity status. See 37 CFR 1.27	4			- Filing	Filing Date June 2		1, 2005		
At Unit 1793  At Unit 1795  Birch Stewart Kolasch & Birch LLP  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee fee(s) i	Fo	r FY 2	009	First	Named Inventor	Yasushi T	AKANO		
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METHOD OF PAYMENT (check all that apply)  Check					Art Unit 1793				
Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Number: 02-2448   Deposit Account Name: Birch Stewart Kolasch & Birch LLP	TOTAL AMOUNT OF PAYMENT (\$) 1,300.00				Attorney Docket No. 0033-1008P				
Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Number: 02-2448   Deposit Account Name: Birch Stewart Kolasch & Birch LLP	METHOD OF PAYMENT (check all that apply)								
Popposit Account   Deposit Account Number   Q2-2448   Deposit Account Name   Birch Stewart Kolasch & Birch LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	,								
Charge fee(s) indicated below  Charge fee(s) indicated below  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Fee (\$) F	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALCULATION	Character (A) in the standard of the standard								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALCULATION	Charge any additional fee(s) or underpayments of fee(s)								
Tell Calculation   Search   And Examination   FES   Small Entity   Fee (\$)	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
Filling FEES   Small Entity   Fee (\$)   Fee									
Filling FEES   Small Entity   Fee (\$)   Fee	1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Paper   Pape		FILING FEES SEARCH FEES EXAMINATION FEES							
Utility 330 165 540 270 220 110  Design 220 110 100 50 140 70  Plant 220 110 330 165 170 85  Reissue 330 165 540 270 650 325  Provisional 220 110 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  - 20 or HP = 0 x = 0.00  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)	Application Type							Fees Paid (\$)	
Design   220   110   100   50   140   70	Utility	330				-			
Plant   220   110   330   165   170   85	Design	220	110 10	00	50 140	_	-		
Reissue 330 165 540 270 650 325  Provisional 220 110 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claims  Fee (\$) Fee (\$) Fee (\$)  Total Claims  Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)	Plant	220	110 3:				_		
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Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Dependent Claims  Fee (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)							-	· ·	
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100 = 750 = (round <b>up</b> to a whole number) x =0.00	Total Sheets	Extra Shee	<u>ls Number of</u>	each addit	ional 50 or fraction		Fee (\$)		
OTHER FEE(s)									
Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)									
Other (e.g., late filing surcharge): RCE Filing Fee and 2 Month Extension Fee 1,300.00									
JBMITTED BY									
registration No. 30538 Telephone 703-205-8000	ignature	<i>a 1</i>	XIV.	Registra	ation No. 39538		Telephone 70	03-205-8000	
ame (Print/Type James T. Eller, Jr. 43463 Date June 16, 2010	lame (Print/Type) James T	ller Jr	- vue	Attorney	/Agent)				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.